

**Department of Public Health and Social Services**  
**Division of Environmental Health**  
**Food Establishment Inspection Report**

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INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE		ESTABLISHMENT NAME	
Regular			11	09 / 22 / 2017		AMERICAN BAKERY	
Follow-up	✓			TIME IN	TIME OUT	PERMIT HOLDER	
Complaint			RATING	11:00 AM	2:30 PM	GREENHILL, INC.	
Investigation			B	SANITARY PERMIT NO.		LOCATION (Address)	
Other:				170001119		LOT 5047-1-1-R1 NEW, HARMON	
ESTABLISHMENT TYPE				AREA	TELEPHONE	No. of Risk Factor/Intervention Violations	RISK CATEGORY
BAKERY				3	5881500	0	2
						No. of Repeat Risk Factor/Intervention Violations	
						0	

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
<b>Supervision</b>						
1	IN	OUT	Person in charge present, demonstrates knowledge, and performs duties			6
<b>Employee Health</b>						
2	IN	OUT	Management awareness; policy present			6
3	IN	OUT	Proper use of reporting, restriction & exclusion			6
<b>Good Hygienic Practices</b>						
4	IN	OUT	N/A	N/O		6
5	IN	OUT	N/A	N/O		6
<b>Preventing Contamination by Hands</b>						
6	IN	OUT	N/A	N/O		6
7	IN	OUT	N/A	N/O		6
8	IN	OUT				6
<b>Approved Source</b>						
9	IN	OUT				6
10	IN	OUT	N/A	N/O		6
11	IN	OUT				6
12	IN	OUT	N/A	N/O		6
<b>Protection from Contamination</b>						
13	IN	OUT	N/A			6
14	IN	OUT	N/A			6
15	IN	OUT				6
<b>Potentially Hazardous Food (TCS Food)</b>						
16	IN	OUT	N/A	N/O		6
17	IN	OUT	N/A	N/O		6
18	IN	OUT	N/A	N/O		6
19	IN	OUT	N/A	N/O		6
20	IN	OUT	N/A			6
21	IN	OUT	N/A	N/O		6
<b>Consumer Advisory</b>						
22	IN	OUT	N/A			6
<b>Highly Susceptible Populations</b>						
23	IN	OUT	N/A			6
<b>Chemical</b>						
24	IN	OUT	N/A			6
25	IN	OUT				6
<b>Conformance with Approved Procedures</b>						
26	IN	OUT	N/A			6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box; if numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
<b>Safe Food and Water</b>						
27			Pasteurized eggs used where required			1
28			Water and ice from approved source			2
29			Variance obtained for specialized processing methods			1
<b>Food Temperature Control</b>						
30			Proper cooling methods used; adequate equipment for temperature control			1
31			Plant food properly cooked for hot holding			1
32			Approved thawing methods used			1
33			Thermometer provided and accurate			1
<b>Food Identification</b>						
34	X		Food properly labeled; original container			1
<b>Prevention of Food Contamination</b>						
35	X		Insects, rodents, and animals not present			2
36			Contamination prevented during food preparation, storage & display			1
37			Personal cleanliness			1
38	X		Wiping cloths: properly used and stored			1
39			Washing fruits and vegetables			1
I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.						
Person in Charge (Print and Sign)				Date:		
RUFIND C. STA. ELENA				9/22/17		
DEH Inspector (Print and Sign)				Follow-up (Circle one): YES NO		
LEILANI NATARRO, EPHO I				10/06/17		

Compliance Status				COS	R	PTS
<b>Proper Use of Utensils</b>						
40			In-use utensils: properly stored			1
41			Utensils, equipment and linens: properly stored, dried, handled			1
42			Single-use/single-service articles: properly stored, used			1
43			Gloves used properly			1
<b>Utensils, Equipment and Vending</b>						
44			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45			Warewashing facilities: installed, maintained, used; test strips			1
46	X		Nonfood-contact surfaces clean			1
<b>Physical Facilities</b>						
47			Hot & cold water available, adequate pressure			2
48			Plumbing installed; proper backflow devices			2
49			Sewage and wastewater properly disposed			2
50			Toilet facilities: properly constructed, supplied, & cleaned			2
51	X		Garbage/refuse properly disposed; facilities maintained			2
52	X		Physical facilities installed, maintained, and clean			1
53	X		Adequate ventilation and lighting; designated areas use			1
<b>Documents and Placards</b>						
54	X		Sanitary Permit, Health Certificates valid and posted			2

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ESTABLISHMENT NAME <b>AMERICAN BAKERY</b>		LOCATION (Address) <b>LOT 5047-1-1-R1 NEW, HARMON</b>	
INSPECTION DATE <b>09, 22, 2017</b>	SANITARY PERMIT NO. <b>170001119</b>	PERMIT HOLDER <b>GREENHILL, INC.</b>	

**TEMPERATURE OBSERVATIONS**

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A FOLLOW-UP INSPECTION WAS CONDUCTED TODAY FOR PREVIOUS INSPECTION DATED 09/21/17 WHICH RESULTED IN A GRADE/RATING OF 41/D. THE PREVIOUS VIOLATIONS OF ITEMS # 2, 8, 13, 14, 21, AND 50 WERE CORRECTED; HOWEVER, VIOLATIONS OF ITEMS # 34, 35, 38, 46, 51, 52, AND 53 REMAIN UNCORRECTED. FACILITY HAS UNTIL 10/06/17 TO CORRECT THESE NON-CRITICAL ITEMS. IN ADDITION, THE FOLLOWING NEW VIOLATION WAS OBSERVED:	
54	MANAGER (ALEX DIEZ) FOUND WORKING WITHOUT A VALID HEALTH CERTIFICATE. HE SAID THAT HE FAILED TO RENEW THE HEALTH CERTIFICATE WHEN IT EXPIRED.  HEALTH CERTIFICATES SHALL BE VALID AND POSTED FOR ANY PERSON EMPLOYED IN A FOOD ESTABLISHMENT.	10/22/17
	RETRIEVED "D" PLACARD NO. 00355 AND NOTICE OF CLOSURE.	
	POSTED "B" PLACARD NO. 00876.	
	ISSUED HIRE SANITARY PERMIT PAYMENT ROUTING SLIP.	
	SANITARY PERMIT SHALL BE RE-INSTATED AFTER PAYMENT OF \$100 TO DPHSS.	
	DISCUSSED THE ABOVE INFORMATION WITH PC, RUFINO STA. ELENA JR.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) <b>RUFINO C. STA. ELENA</b>	Date: <b>9/28/17</b>
DEH Inspector (Print and Sign) <b>LEILANI NAYARRA, DPHD I</b>	Date: <b>09/22/17</b>